

FORM PTO-875 (Rev. 02/2005)



## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

**Application or Docket Number** 

10/534261

Patent and Trademark Office - U.S. DEPARTMENT OF COMMERCE

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		_	TYPE		OR -	SMALL ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARG	SE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			her situations = 100 / \$ 200	]	EXAM. FEE		1	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			her situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			<i>52</i> minus 20 = ,		*	32		X \$ 25 =		OR	X \$ 50 =	1600
INDEPENDENT CLAIMS			2 minus 3 = .		*			X \$ 100 =		OR	X \$ 200 =	
MUI	TIPLE DEPEN	IDENT CLAIM PR	ESENT	•		Ŋ.		+ \$ 180 =		OR	+ \$ 360 =	360
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	2860	
11	-30-05	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	28	REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	28	Minus	- 20	)	- 8		X \$ 25 =		OR	X \$ 50 =	400
	Independent	- 2	Minus	···3		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	400
		(Column 1)		(Colum	nn 2)	(Column 3)						10.0
욻		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =	i	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =		
T		· · · · ·						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		mn 1 is less than the							•			
***	If the "Highest Nu	mber Previously Pai mber Previously Pai nber Previously Paid	For IN THIS SPA	ACE is less	than '3',	enter "3".	in the	appropriate box	in column 1.			